Fill in this in	nformation to i	dentify your case	and this filing:		
Debtor 1	Karen	Pamelia	Shrier		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court fo	r the: WESTERN DIS	STRICT OF TEXAS		
Case number	16-10420			☐ Chack	if this is an
(if known)					led filing
Official For	m 106A/B				
	A/B: Property	y			12/15
Fart 1: Do you own	both are equally re rm. On the top of a Describe Each F	sponsible for supplyiny additional pages, Residence, Buildir I or equitable interest	e as complete and accurate a ing correct information. If mo write your name and case nu ing, Land, or Other Real E in any residence, building, la	re space is needed, attach a mber (if known). Answer eve Estate You Own or Have	separate ery question.
1.1. 2399 Purisima		What is the Check all Strion Single	ne property? that apply. e-family home x or multi-unit building	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim Current value of the	ims on Schedule D:
Half Maan Bay		Condo	ominium or cooperative factured or mobile home	entire property?	portion you own?
Half Moon Bay City		Code Land		\$2,900,000.00	\$2,900,000.00
		Times		Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ple, tenancy by the
County		Other		- Fee simple	,
Single family r	residence	Check one	an interest in the property?	·	
		☐ Debto	or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and anoth	Check if this is comm (see instructions)	nunity property
			ormation you wish to add abo	ut this item, such as local	_
			of your entries from Part 1, in ite that number here		\$2,900,000.00
Part 2: D	escribe Your V	ehicles			
-		•	n any vehicles, whether they a also report it on Schedule G: Ex	_	•
3. Cars, vans,	, trucks, tractors, s	sport utility vehicles,	motorcycles		
□ No ☑ Yes					

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Debtor		Pamelia		case number (if known) <u>16-1</u>	0420
	First Name	Middle Name	Last Name		
3.1.			Who has an interest in the property?		ims or exemptions. Put the
Make:		BMW	Check one.	amount of any secured cla Creditors Who Have Clain	
Model:		335i	☑ Debtor 1 only		
Year:		2008	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approx	imate mileage:		Debtor 1 and Debtor 2 only		
• •	nformation:		At least one of the debtors and another	er \$7,500.00	\$7,500.00
	BMW 335i		Check if this is community property (see instructions)	y	
3.2.			Who has an interest in the property?	Do not deduct secured cla	ims or exemptions. Put the
Make:		Ford	Check one.	amount of any secured cla	•
Model:		F250	Debtor 1 only	Creditors Who Have Clain	ns Secured by Property.
Year:		1997	Debtor 2 only	Current value of the	Current value of the
		1337	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
• •	imate mileage:		At least one of the debtors and another	er \$7,500.00	\$7,500.00
	nformation:				
1997	Ford F250		Check if this is community property (see instructions)	У	
	xamples: Boats		and other recreational vehicles, other veal watercraft, fishing vessels, snowmobiles,		
			own for all of your entries from Part 2, inc Part 2. Write that number here		\$15,000.00
Part	3: Descr	ibe Your Personal	and Household Items		
Do you	u own or have a	any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	s and furnishings appliances, furniture, line	ens china kitchenware		
Г		apphariocs, rumiture, iiii	one, omia, monenware		
<u></u>	_	e See continuatio	n page(s).		\$14,400.00
	•		video, stereo, and digital equipment; comp evices including cell phones, cameras, med		
	No Ves Describ	e 4 Televisions			\$1,000.00
<u>v</u>	1 100. D000115	- Televisions			Ψ1,000.00
		ues and figurines; paintin	gs, prints, or other artwork; books, pictures, collections; other collections, memorabilia, o	•	
<u>-</u>	No Yes. Describ	e			
	xamples: Sports		, and other hobby equipment; bicycles, poctools; musical instruments	ol tables, golf clubs, skis;	
<u> </u>	No Yes. Describ	e 8 Saddles			\$10,000.00
E		s, rifles, shotguns, ammu	inition, and related equipment		
<u>v</u>] No] Yes. Describ	e			

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Debt	or 1	Karen	Pame	elia	Shrier	Case number (if known)	16-10420
		First Name	Middle	Name	Last Name		
11.	Clothes	or Evendey e	olothoo furo l	oothor ooo	to decigner week above	acceptation	
		s. Everyday c	ioures, rurs, r	ealliel coa	ts, designer wear, shoes,	accessories	
	✓ No ☐ Yes	Describe					
40	—						
12.	Jewelry Example		•	me jewelry,	engagement rings, wedd	ing rings, heirloom jewelry, watches, ç	gems,
	□ No ☑ Yes	Describe	See contin	uation pa	age(s).		\$2,200.00
13.		m animals es: Dogs, cats	, birds, horses	3			
	✓ No ☐ Yes	Describe					
14.	Any oth	•	nd househole	d items yo	u did not already list, in	cluding any health aids you	
	√ No						
	Yes	Give specific					
15.						entries for pages you have	→ \$27,600.00
Pa	rt 4:	Describe	Your Finar	ncial Ass	sets		
Do y	ou own	or have any le	egal or equita	able intere	st in any of the followin	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you petition	have in your	wallet, in y	our home, in a safe depo	sit box, and on hand when you file you	иг
	√ No						
	Yes					Cash:	
17.	Deposit	s of money					
	•	es: Checking,	houses, and o			of deposit; shares in credit unions, a multiple accounts with the same	
	□ No						
	∀ Yes			Institutio	on name:		
	17.	1. Checking	account:		ng account xxx5619		\$3,079.15
	17.	2. Checking	account:		ng account DBA CA Ranch xx979	99	\$35.86
	17.	3. Savings a	account:	_	s account xxx8759		\$517.24
18.	Bonds.	mutual funds,	or publicly t	raded sto	cks		
					with brokerage firms, mon	ey market accounts	
	□ No						
	✓ Yes		Institution	on or issue	r name:		
			Charle	s Schwa	b account		\$996.00

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Debt	or 1 Karen	Pamelia	Shrier	Case number (if known)	16-10420
	First Name	Middle Name	Last Name		
	Non-publicly traded stocl an interest in an LLC, par		•	orporated businesses, including	
	□ No				
	Yes. Give specific				
	information about	Name of a city		0/ -1	
	them	Name of entity:		% of owner	iship:
		Electronic Poly			
		10,200,229 sha	res -	52%	\$9,095,620.00
	-	lude personal checl	ks, cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.	
	☑ No				
	Yes. Give specific				
	information about				
	them	Issuer name:			
	Retirement or pension ac Examples: Interests in IRA profit-sharing p	, ERISA, Keogh, 40	01(k), 403(b), thrift saving	gs accounts, or other pension or	
	□ No				
	Yes. List each				
	account separately.	Type of account:	Institution name:		
		Pension plan:	Northern Trust Pe	ension plan	\$10,359.00
		eposits you have m		tinue service or use from a company ctric, gas, water), telecommunications	3
	☑ No □ Yes		Institution name or indiv	idual:	
23.	Annuities (A contract for	a specific periodic p	ayment of money to you	, either for life or for a number of year	s)
	☑ No				
	☐ Yes	Issuer name and	description:		
	Interests in an education 26 U.S.C. §§ 530(b)(1), 52			ogram, or under a qualified state tu	ition program.
	☑ No				
	☐ Yes	Institution name a	nd description. Separate	ely file the records of any interests. 1	1 U.S.C. § 521(c)
	powers exercisable for ye		erty (other than anythin	g listed in line 1), and rights or	
	✓ No✓ Yes. Give specific information about them	1			
	Patents, copyrights, trade Examples: Internet domain				
	☐ No ☑ Yes. Give specific			s are not paid) which which act	tually <u>Unknown</u>
	information about them			the Debtor is 52% owner atents not applied for	
		_	•	on holdings, liquor licenses, professio	nal licenses
	✓ No✓ Yes. Give specific information about them				

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Debt	or 1	Karen	Pamelia	Shrier	Case number (if known)	16-10420
Mon	ey or p	First Name	Middle Name	Last Name		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to	you			
	✓ No	s. Give specific	ninformation			Federal: \$0.00
	ab	out them, includ	ling whether			State: \$0.00
	-	u already filed th d the tax years				Local: \$0.00
29.	Examp		r lump sum alimony, spo	ousal support, child suppo	ort, maintenance, divorce settlement,	
	✓ No	s. Give specific	c information		Alimony:	\$0.00
	_				Maintenand	ee: \$0.00
					Support:	\$0.00
					Divorce set	tlement: \$0.00
					Property se	ettlement: \$0.00
31.	Interes Examp No □ Ye con	s. Give specific sts in insurance les: Health, dis- s. Name the insumpany of each p	e policies ability, or life insurance; surance policy		HSA); credit, homeowner's, or renter's	
32.	Any in If you a	are the beneficia	rty that is due you fron	n someone who has died ct proceeds from a life ins	Beneficiary: d surance policy, or are currently	Surrender or refund value:
	✓ No	s. Give specific	cinformation			
33.				you have filed a lawsuit	or made a demand for payment to sue	
	✓ No	s. Describe ead	ch claim			
34.		contingent and to set off claim	•	f every nature, including	counterclaims of the debtor and	
	✓ No	s. Describe ead	ch claim			
35.	Any fir	nancial assets y	you did not already list	:		
	✓ No	s. Give specific	cinformation			
36.					entries for pages you have	> \$9,110,607.25

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Deb	tor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if kno	wn) 16-10420
Pa	art 5:	Describe An	y Business-Relat	ed Property You Ow	n or Have an Interest In.	List any real estate in Part 1.
37.	☑ N	o. Go to Part 6.	ny legal or equitable i	nterest in any business-ı	related property?	
	□ **	es. Go to line 38.				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Acco	unts receivable o	r commissions you a	Iready earned		
	☑ Y	o es. Describe				
39.	Exam	ples: Business-re desks, chair	ishings, and supplies lated computers, softw s, electronic devices		oiers, fax machines, rugs, teleph	nones,
	☑ v	o es. Describe				
40.	_		quipment, supplies yo	ou use in business, and t	ools of your trade	
	☐ Y	o es. Describe				
41.	Inven	tory				
	☑ N	o es. Describe				
42.	Intere	ests in partnershi	ps or joint ventures			
	ΜN	0				
		es. Describe I	Name of entity:		% of ov	wnership:
43.	Custo	omer lists, mailing	g lists, or other comp	ilations		
	☑ Y			lentifiable information (a	s defined in 11 U.S.C. § 101(41	A))?
44.	Any b	ousiness-related	property you did not	already list		
	☑ N	o es. Give specific	information.			
45.			•		entries for pages you have	\$0.00
Pa	art 6:			mercial Fishing-Rela farmland, list it in Part	ated Property You Own c : 1.	or Have an Interest In.
46.	Do yo	ou own or have a	ny legal or equitable i	nterest in any farm- or co	ommercial fishing-related prop	perty?
	_	o. Go to Part 7. es. Go to line 47.	-	-		

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Deb	tor 1	Karen	Pamelia	Shrier	Case number (if known)	16-10420
		First Name	Middle Name	Last Name		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	:	les: Livestock, p	oultry, farm-raised fish			
	☐ No ✓ Ye	s 29 horses				\$15,000.00
48.	Crops-	either growing	or harvested			
		s. Give specific				
49.	Farm a	ınd fishing equip	oment, implements, m	achinery, fixtures, an	d tools of trade	
	□ No ☑ Ye		nuation page(s).			\$22,000.00
50.	Farm a	and fishing supp	lies, chemicals, and fe	eed		
	✓ No					
51.	Any fa	rm- and comme	rcial fishing-related pr	operty you did not all	ready list	
	_	s. Give specific				
52.					ny entries for pages you have	→ \$37,000.00
Pa	art 7:	Describe All	Property You Ow	n or Have an Inter	est in That You Did Not List Al	pove
53.	•	•	perty of any kind you ets, country club memb	•		
	✓ No □ Ye	s. Give specific	information.			
54.	Add th	e dollar value of	f all of your entries fro	m Part 7. Write that r	umber here	\$0.00

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case nu	ımber (if known)	16-104	20
Part 8:	List the Tota	lls of Each Part of	this Form				
55. Part 1	: Total real estat	e, line 2				→ _	\$2,900,000.00
56. Part 2	2: Total vehicles,	line 5		\$15,000.00			
57. Part 3	3: Total personal	and household items,	line 15	\$27,600.00			
58. Part 4	l: Total financial	assets, line 36		\$9,110,607.25			
59. Part 5	5: Total business	-related property, line	45	\$0.00			
60. Part 6	6: Total farm- and	fishing-related prope	rty, line 52	\$37,000.00			
61. Part 7	: Total other pro	perty not listed, line 5	4	+\$0.00			
62. Total	personal propert	y. Add lines 56 throu	gh 61	\$9,190,207.25	Copy personal property total	→ +	\$9,190,207.25
63. Total	of all property or	n Schedule A/B. Add	d line 55 + line 62.				\$12,090,207.25

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Deb	tor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known) _	16-10420
6.	House	ehold goods and	furnishings (details):			
	3 Ente	ertainment cer	nters			\$300.00
	3 Rec	liners				\$1,200.00
	Coffe	e table				\$50.00
	Music	cal instrument				\$1,000.00
	Dinin	g table				\$2,000.00
	Stove	•				\$400.00
	Dishv	vasher				\$250.00
	Micro	wave				\$100.00
	Refriç	gerator				\$200.00
	Freez	er				\$100.00
	Dress	ser				\$800.00
	Armo	ire				\$500.00
	Bed					\$2,000.00
	Book	s				\$500.00
	Pictu	res, art, decora	ative items			\$5,000.00
12.	Jewel	ry (details):				
	Watcl	h				\$200.00
	Fur c	oat				\$2,000.00
49.	Farm a	and fishing equi	pment, implements, m	achinery, fixtures, and t	ools of trade (details):	
	John	Deere Tractor				\$15,000.00
	Small	John Deere T	ractor			\$7,000.00

Fill in this in	formation to id	lontify your	caco:			
Debtor 1	Karen	Pamelia	Shrier			
	First Name	Middle Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name			
United States Ba	inkruptcy Court for	the: WESTER	N DISTRICT OF TE	XAS	S	Check if this is an
Case number (if known)	16-10420					amended filing
Official Form						
Schedule C	: The Prope	rty You Cl	aim as Exemp	ot		04/16
Using the property	you listed on Sch	edule A/B: Prop o this page as m	erty (Official Form 106	6A/B) as your source, list th	esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages,
exempted up to the to the contract of the cont	he amount of any enefits, and tax-ex % of fair market v	applicable stat cempt retireme value under a la	cutory limit. Some ex nt fundsmay be unl nw that limits the exe	emp imite mpti	otionssuch as those ed in dollar amount. I	value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	erty You Cla	nim as Exempt			
1. Which set of	exemptions are y	ou claiming?	Check one only,	even	if your spouse is filing	with you.
✓ You are		l federal nonban	kruptcy exemptions.	11 U	.S.C. § 522(b)(3)	,
_					fill in the information	halaw
			•	• •	fill in the information	
•	of the property and tlists this proper		Current value of the portion you own			Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description:			\$2,900,000.00	$\overline{\mathbf{Q}}$	\$100,000.00	C.C.P. § 704.730
2399 Purisima (Single family re Line from Schedul	sidence				100% of fair market value, up to any applicable statutory limit	
-	•	-	more than \$160,375? Jears after that for cas		led on or after the date	of adjustment.)
✓ No ☐ Yes. Did ☐ No ☐ Yes		property covered	I by the exemption with	hin 1	,215 days before you f	iled this case?

IN RE: Karen Pamelia Shrier CASE NO 16-10420

CHAPTER 13

Scheme Selected: System 1

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$2,900,000.00	\$1,737,952.22	\$1,162,047.78	\$100,000.00	\$1,062,047.78
3.	Motor vehicles (cars, etc.)	\$15,000.00	\$0.00	\$15,000.00	\$0.00	\$15,000.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$14,400.00	\$0.00	\$14,400.00	\$0.00	\$14,400.00
7.	Electronics	\$1,000.00	\$0.00	\$1,000.00	\$0.00	\$1,000.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$10,000.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12.	Jewelry	\$2,200.00	\$0.00	\$2,200.00	\$0.00	\$2,200.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$3,632.25	\$0.00	\$3,632.25	\$0.00	\$3,632.25
18.	Bonds, mutual funds or publicly traded stocks	\$996.00	\$0.00	\$996.00	\$0.00	\$996.00
19.	Non-pub. traded stock and int. in businesses	\$9,095,620.00	\$0.00	\$9,095,620.00	\$0.00	\$9,095,620.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$10,359.00	\$0.00	\$10,359.00	\$0.00	\$10,359.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

IN RE: Karen Pamelia Shrier CASE NO 16-10420

CHAPTER 13

Scheme Selected: System 1

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$15,000.00	\$0.00	\$15,000.00	\$0.00	\$15,000.00
48.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$22,000.00	\$0.00	\$22,000.00	\$0.00	\$22,000.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$12,090,207.25	\$1,737,952.22	\$10,352,255.03	\$100,000.00	\$10,252,255.03

IN RE: Karen Pamelia Shrier CASE NO 16-10420

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description Market Value Lien Equity

Real Property

(None)

Personal Property

(None)

TOTALS: \$0.00 \$0.00 \$0.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
2399 Purisima Creek Rd.	\$2,900,000.00	\$1,737,952.22	\$1,162,047.78	\$1,062,047.78
Personal Property				
2008 BMW 335i	\$7,500.00		\$7,500.00	\$7,500.00
1997 Ford F250	\$7,500.00		\$7,500.00	\$7,500.00
3 Entertainment centers	\$300.00		\$300.00	\$300.00
3 Recliners	\$1,200.00		\$1,200.00	\$1,200.00
Coffee table	\$50.00		\$50.00	\$50.00
Musical instrument	\$1,000.00		\$1,000.00	\$1,000.00
Dining table	\$2,000.00		\$2,000.00	\$2,000.00
Stove	\$400.00		\$400.00	\$400.00
Dishwasher	\$250.00		\$250.00	\$250.00
Microwave	\$100.00		\$100.00	\$100.00
Refrigerator	\$200.00		\$200.00	\$200.00
Freezer	\$100.00		\$100.00	\$100.00
Dresser	\$800.00		\$800.00	\$800.00
Armoire	\$500.00		\$500.00	\$500.00
Bed	\$2,000.00		\$2,000.00	\$2,000.00

IN RE: Karen Pamelia Shrier CASE NO 16-10420

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

Books	\$500.00	\$500.00	\$500.00
Pictures, art, decorative items	\$5,000.00	\$5,000.00	\$5,000.00
4 Televisions	\$1,000.00	\$1,000.00	\$1,000.00
8 Saddles	\$10,000.00	\$10,000.00	\$10,000.00
Watch	\$200.00	\$200.00	\$200.00
Fur coat	\$2,000.00	\$2,000.00	\$2,000.00
Checking account	\$3,079.15	\$3,079.15	\$3,079.15
Savings account	\$517.24	\$517.24	\$517.24
Checking account	\$35.86	\$35.86	\$35.86
Charles Schwab account	\$996.00	\$996.00	\$996.00
Electronic Polymers	\$9,095,620.00	\$9,095,620.00	\$9,095,620.00
Northern Trust Pension plan	\$10,359.00	\$10,359.00	\$10,359.00
29 horses	\$15,000.00	\$15,000.00	\$15,000.00
John Deere Tractor	\$15,000.00	\$15,000.00	\$15,000.00
Small John Deere Tractor	\$7,000.00	\$7,000.00	\$7,000.00

TOTALS: \$12,090,207.25 \$1,737,952.22 \$10,352,255.03 \$10,252,255.03

Summary	
A. Gross Property Value (not including surrendered property)	\$12,090,207.25
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$12,090,207.25
D. Gross Amount of Encumbrances (not including surrendered property)	\$1,737,952.22
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$1,737,952.22
G. Total Equity (not including surrendered property) / (A-D)	\$10,352,255.03
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$10,352,255.03
J. Total Exemptions Claimed	\$100,000.00
K. Total Non-Exempt Property Remaining (G-J)	\$10,252,255.03

Fill in this info	ormation to ide	ntify your case:				
Debtor 1	Karen	Pamelia	Shrier			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for th	e: WESTERN DIS	TRICT OF TEXAS	<u> </u>		
Case number (if known)	16-10420				Check if this is amended filing	
Official Form	106D					
		ho Have Clai	ms Secured	by Property		12/15
1. Do any credit No. Chee Yes. Fill Part 1: Lis List all secure claim, list the coreditor has a	additional pages, very sors have claims see the claims see the claims and submin all of the information all of the claims. If a credit creditor separately for particular claim, list ible, list the claims in	cured by your properties form to the continuous below.	ne secured re than one in Part 2. As	Column A Amount of claim Do not deduct the value of collateral		
2.1		Describe the		\$180,000.00	\$2,900,000.00	ii diiy
D.K. Financial		secures the c —— Homestead		<u> </u>		
Creditor's name Don Klein, Mail I Number Street 3056 Castro Vall		Homesteau	iii CA			
			•	is: Check all that apply.		
Castro Valley	CA 94546 State ZIP Code	Contingen Unliquidat Disputed				
Who owes the deb	ot? Check one.	Nature of lien	. Check all that app	oly.		
Debtor 1 only Debtor 2 only		_		n as mortgage or secured	car loan)	
Debtor 1 and D	ebtor 2 only	_	ien (such as tax lien	, mechanic's lien)		
	the debtors and and	thor —	lien from a lawsuit luding a right to offso	et)		
Check if this c		Deed of		,		
Date debt was inc		Last 4 digits	of account number			
Debt to be conve	erted into shares	of stock in the D	ebtors corporation			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$180,000.00

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Debtor 1	Karen	Pamelia			Case number	(if known)	16-10420	
	First Name	Middle Nar	ne Last Name					
Part 1:		_	this page, number them ous page.		Column A Amount of claim Do not deduct the value of collateral		n B of collateral upports this	Column C Unsecured portion If any
2.2			Describe the property that secures the claim:	_ 5	1,357,952.2	2 \$2	2,900,000.00	
Creditor's nam Attn: Corre	espondence		2399 Purisima Creek Road, Half Moon Bay, CA					
Number Str P.O. Box 5								
Los Angelo City Who owes t	es CA State	90051-4387 ZIP Code eck one.	As of the date you file, the clair Contingent Unliquidated Disputed Nature of lien. Check all that ap		ck all that appl	y.		
 ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt 			 ✓ An agreement you made (such as tax lie) ✓ Statutory lien (such as tax lie) ✓ Judgment lien from a lawsuit ✓ Other (including a right to off Deed of Trust 	ch as mor en, mecha		ed car loan)	
Date debt w	as incurred		Last 4 digits of account numbe	er <u>8</u>	7 7 4			
2.3			Describe the property that secures the claim:	_	\$200,000.00	0 \$2	2,900,000.00	
Creditor's nam	espondence reet		2399 Purisima Creek Road, Half Moon Bay, CA					
Los Angeles CA 90051-4387 City State ZIP Code Who owes the debt? Check one.			As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.					
☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and and ☐ Check if this claim relates to a community debt		otors and another	☐ An agreement you made (such as tax lie) ☐ Statutory lien (such as tax lie) ☐ Judgment lien from a lawsuit) ☑ Other (including a right to off Mortgage arrears)	en, mecha		ed car loan)	
		Various	Last 4 digits of account numbe	er <u>8</u>	7 7 4			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,557,952.22

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$1,737,952.22

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known)				
Part 2	List Other	rs to Be Notified fo	r a Debt That Y	ou Already Listed				
example, then list t list the ac	Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.							
National Default Servicing Corporation Name 7720 North 16th Street, Suite 300 Number Street				On which line in Part 1 did you enter the creditor? Last 4 digits of account number				
_	Phoenix Sity		Z 85020 tate ZIP Code					

Fill in this information to identify your c	ase:			
Debtor 1 Karen Pamelia First Name Middle Name	Shrier Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: WESTERN	N DISTRICT OF TEXAS			
Case number 16-10420				
(if known)			Check if this is a amended filing	an
Official Form 106E/F				
Schedule E/F: Creditors Who Hav	e Unsecured Claims			12/15
on Schedule A/B: Property (Official Form 106A/B) Do not include any creditors with partially secured from space is needed, copy the Part you need, for this page. On the top of any additional pages, we have a List All of Your PRIORITY Unstable of the secure of the secu	I claims that are listed in Schedule ill it out, number the entries in the larite your name and case number (i	D: Creditors Who Ho	old Claims Secur	ed by Property.
 Do any creditors have priority unsecured clain No. Go to Part 2. Yes. 	ms against you?			
List all of your priority unsecured claims. If a claim. For each claim listed, identify what type o	f claim it is. If a claim has both priori	ty and nonpriority amo	ounts, list that clair	•
show both priority and nonpriority amounts. As n more space is needed for priority unsecured claim claim, list the other creditors in Part 3.			-	or's name. If
more space is needed for priority unsecured clair	ms, fill out the Continuation Page of F	Part 1. If more than o	ne creditor holds a	or's name. If a particular
more space is needed for priority unsecured clair claim, list the other creditors in Part 3.	ms, fill out the Continuation Page of F	Part 1. If more than o	-	or's name. If
more space is needed for priority unsecured clair claim, list the other creditors in Part 3.	ms, fill out the Continuation Page of F	Part 1. If more than o	ne creditor holds a	or's name. If a particular Nonpriority
more space is needed for priority unsecured clair claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the	ms, fill out the Continuation Page of F	Part 1. If more than o uction booklet. Total claim	Priority amount	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured clair claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the content of	ms, fill out the Continuation Page of F	Part 1. If more than o uction booklet. Total claim	Priority amount	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured clair claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the context of	ms, fill out the Continuation Page of F e instructions for this form in the instr - Last 4 digits of account number - When was the debt incurred? - As of the date you file, the claim i - Contingent	Part 1. If more than o uction booklet. Total claim \$16,000.00	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured clair claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the content of	ms, fill out the Continuation Page of F e instructions for this form in the instr - Last 4 digits of account number - When was the debt incurred? - As of the date you file, the claim i	Part 1. If more than o uction booklet. Total claim \$16,000.00	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured claim claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the content of	e instructions for this form in the instructions for this form in the instructions. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim in the instruction in the instruction. Unliquidated incurred in the claim in the instruction in	Part 1. If more than o uction booklet. Total claim \$16,000.00 s: Check all that app	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured claim claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the second content of the second co	e instructions for this form in the instr Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of PRIORITY unsecured clai Domestic support obligations	Part 1. If more than o uction booklet. Total claim \$16,000.00 s: Check all that app	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured claim claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the second content of the second co	e instructions for this form in the instr Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts y Claims for death or personal inj	Part 1. If more than o uction booklet. Total claim \$16,000.00 s: Check all that app	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount
more space is needed for priority unsecured claim claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the second content of the second co	e instructions for this form in the instr Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts y	Part 1. If more than o uction booklet. Total claim \$16,000.00 s: Check all that app	Priority amount \$16,000.00	or's name. If a particular Nonpriority amount

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Debtor 1	Karen		Pamelia	Shrier		ase number (if known)	16-10420	
Part 1:	First Name Your PR		Middle Name Unsecured (Last Name Claims Continu	uation Page			
After listin	•	on this pa	age, number the	m sequentially fron	ı the	Total claim	Priority amount	Nonpriority amount
2.2 The Law	Offices of Do	uglas J	. Powell, P.	─ Last 4 digits of a	ccount number	\$2,410.00	\$2,410.00	\$0.00
Priority Creditor's Name 820 West 10th Street Number Street			When was the debt incurred? 04/28/2016 — As of the date you file, the claim is: Check all that apply. Contingent					
Austin City		TX State	78701 ZIP Code	Unliquidated Disputed				
	red the debt?	Check	one.	Type of PRIORIT		im:		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			 Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated ✓ Other. Specify Attorney fees for this case 					
Yes								

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Debtor 1	Karen	Pamelia	Shrier	Case number (if known) 16-10420
	First Name	Middle Name	Last Name	
Part 2:	List All of	Your NONPRIORI	TY Unsecured Clain	ıs
3. Do an	v creditors have	nonnriority unsecure	d claims against you?	
	-			court with you other schedules.
ш.	es	riing to report in this pa	it. Gubilit tills form to the	court warryou outer scriedules.
If a cre type o	editor has more the claim it is. Do n	nan one nonpriority uns not list claims already in	ecured claim, list the cred cluded in Part 1. If more	er of the creditor who holds each claim. itor separately for each claim. For each claim listed, identify what than one creditor holds a particular claim, list the other creditors in the Continuation Page of Part 2.
4.1				
Bank of A	\morica		Last 4 digits of acco	<u>\$15,000.00</u> unt number
Nonpriority C	reditor's Name		When was the debt i	<u> </u>
P.O. Box Number	15019 Street			le, the claim is: Check all that apply.
			Contingent	
			Unliquidated Disputed	
Wilmingto	on	DE 19850-5019	— —	
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	ΓY unsecured claim:
☑ Debtor			Student loans Obligations arisin	g out of a separation agreement or divorce
Debtor	· 2 only · 1 and Debtor 2 o	inly	that you did not re	eport as priority claims
_	at one of the debto	•		or profit-sharing plans, and other similar debts
Check	if this claim is fo	or a community debt	Other. Specify Credit Card	
	n subject to offs	et?		
✓ No ☐ Yes				
Yes				
4.2				Unknown
R. D. Chil			Last 4 digits of acco	unt number
	reditor's Name K Whinery Dr.		When was the debt i	
Number	Street			le, the claim is: Check all that apply.
			Contingent Unliquidated	
Austin		TX 78728	Disputed	
City		State ZIP Code	Type of NONPRIORI	ΓY unsecured claim:
		Check one.	☐ Student loans	
☑ Debtor	•			g out of a separation agreement or divorce eport as priority claims
☐ Debtor	1 and Debtor 2 o			or profit-sharing plans, and other similar debts
_	it one of the debto	ors and another or a community debt	Other. Specify	
_	n subject to offs		Judment	
√ No	300,000 10 0113	 -		
☐ Yes				
Debt is al	lso against the	corporation which	is presently paying th	is debt.

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known)	16-10420	
Part 3:	-		ut a Debt That You Alread	dy Listed		

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Internal Revenu	e Service		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 300 E. 8th St. Number Street STOP 5022 AUS	S		Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Austin City	TX State	78701 ZIP Code	Last 4 digits of account number			
Jeffrey Barnett & Associates Name 13740 Resin blvd, St. N5 Number Street			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Austin	TX State	78750 ZIP Code	Last 4 digits of account number			

Debtor 1 Karen Pamelia Shrier Case number (if known) 16-10420
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$16,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} -	\$2,410.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$18,410.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
6g. Obligations arising out of a separat		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} -	\$15,000.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$15,000.00

Fill in this inf	ormation to iden	tify your case:		
Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	: WESTERN DIS	TRICT OF TEXAS	
Case number (if known)	16-10420			Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to ider	ntify your case:		
Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	E WESTERN DIS	TRICT OF TEXAS	
Case number (if known)	16-10420			Check if this is an amended filing

Official Form 106H

✓ No ☐ Yes

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

2.	Within the last 8 years, have you lived in a community prop include Arizona, California, Idaho, Louisiana, Nevada, New Me.	perty state or territory? (Community property states and territories exico, Puerto Rico, Texas, Washington, and Wisconsin.)
	 No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent No Yes 	live with you at the time?
3.	person shown in line 2 again as a codebtor only if that pers	r spouse as a codebtor if your spouse is filing with you. List the son is a guarantor or cosigner. Make sure you have listed the (Official Form 106G). Use n 2.
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:

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Fill in this inform	mation to identif	y your <u>case:</u>				
Debtor 1	Karen	Pamelia	Shrier			
Debtor 1	First Name	Middle Name	Last Name		Che	ck if this is:
Debtor 2	First Name	Middle Name	Loot Nome		_	An amended filing
(Spouse, if filing)	First Name		Last Name	VAC		A supplement showing postpetition
	ruptcy Court for the: 16-10420	WESTERN	ISTRICT OF TE	XAS	— "	chapter 13 income as of the following date:
Case number (if known)	16-10420					MM / DD / YYYY
Official Form 10	061					WINT BETTITT
Schedule I: Yo	our Income					12/15
include information a about your spouse. I your name and case	bout your spouse. If more space is nee	If you are separ ded, attach a se Answer every c	ated and your spo parate sheet to th	ouse is not	filing with y	spouse is living with you, ou, do not include information any additional pages, write
Fill in your emplinformation.	oyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more		umant status				
job, attach a sepa with information a		yment status	✓ Employed☐ Not employ	ed		☐ Employed ☐ Not employed
additional employ	rers. Occup	ation	CEO			_
Include part-time, or self-employed		yer's name	Electronic Pol	ymers Inc	С.	
Occupation may i student or homen applies.	=p.o	yer's address	321 Limestone Number Street	e Terrace		Number Street
			Jarrell	TX	76537	- Out. 7: Out.
			City	State	e Zip Code	City State Zip Code
	How Id	ong employed ti	nere? 15 year	rs		
Part 2: Give	Details About Mo	onthly Incom	e			
Estimate monthly inc	ome as of the date y	ou file this form		ning to repo	rt for any line	, write \$0 in the space. Include your
non-filing spouse unle	, ,		er combine the inf	ormation fo	ır all employe	rs for that person on the lines below. If
you need more space,			.,		. a ap.a.	
				For	Debtor 1	For Debtor 2 or non-filing spouse
	ss wages, salary, and s). If not paid monthles			2	\$11,500.00	
3. Estimate and list	t monthly overtime p	oay.		3. + _	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$11,500.00	

Official Form 106l Schedule I: Your Income page 1

Debto	or 1	Karen	Pamelia	Shrier		Case nui	mber ((if known)	<u> 16-</u>	<u>-104</u>	20	
		First Name	Middle Name	Last Name		For Debtor 1		r Debtor 2 n-filing sp				
(Сор	y line 4 here .			4.	\$11,500.00		3 - 1		_		
5. I	List	all payroll de	ductions:				_					
			e, and Social Security dec	luctions	5a.	\$0.00						
	5b.	Mandatory co	ontributions for retirement	plans	5b.	\$0.00						
	5c.	Voluntary co	ntributions for retirement	plans	5c.	\$0.00						
į	5d.	Required rep	ayments of retirement fun	d loans	5d.	\$0.00						
	5e.	Insurance			5e.	\$0.00						
	5f.	Domestic su	pport obligations		5f.	\$0.00	_					
į	5g.	Union dues			5g.	\$0.00	_					
į	5h.	Other deduct Specify:	tions.		5h. -	\$0.00	_					
		the payroll do	eductions. Add lines 5a	+ 5b + 5c + 5d + 5e + 5f +	6.	\$0.00	_					
7. (Calc	culate total mo	onthly take-home pay.	Subtract line 6 from line 4.	7.	\$11,500.00						
8. I	List	all other inco	me regularly received:									
8	За.		rom rental property and front	om operating a	8a.	\$0.00	_					
		gross receipts	ment for each property and s, ordinary and necessary but hly net income.	ĕ								
8	Bb.	Interest and	dividends		8b.	\$0.00						
8	Вс.		ort payments that you, a negularly receive	on-filing spouse, or a	8c.	\$0.00	_		_			
			ny, spousal support, child soment, and property settleme									
8	3d.	Unemployme	ent compensation		8d.	\$0.00						
		Social Secur	•		8e.	\$2,841.00	_					
	Bf.		ment assistance that you	regularly receive			_					
		cash assistan	assistance and the value (if ce that you receive, such as er the Supplemental Nutritio bsidies.	s food stamps								
		Specify:			8f.	\$0.00						
8	Ba.	Pension or re	etirement income		- 8g.	\$863.00	_					
8	Bh.	Other month	ly income.		J		-		—			
		Specify:	•		8h. -	\$0.00						
9.	Add	all other inco	ome. Add lines 8a + 8b + 8d	c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,704.00						
			/ income. Add line 7 + line ine 10 for Debtor 1 and Deb		10.	\$15,204.00	+ _			=	\$15,2	04.00
			ular contributions to the	• .	و ما م	ula I						
I	nclu		ns from an unmarried partne				ır roor	mmates, ar	nd oth	ner		
ſ	Do r	not include any	amounts already included i	n lines 2-10 or amounts tha	ıt are r	not available to pay	expen	ses listed	in Sc	hedu	le J.	
5	Spe	cify:							11.	+		<u>\$0.00</u>
			n the last column of line 10 t amount on the Summary o						12.		\$15,2	04.00
i	f it a	applies.	ŕ					,		_	combined nonthly i	
_		-	increase or decrease with									
		No.		at \$7456 twice monthly								
l	$ \sqrt{} $	Yes. Explain:	every month to pay th salary will not be avail	at salary. The amount : lable every pay period.	show	n as income is b	ased	on the e	xpec	tati	on that	the ful

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G	ill in this inforn	nation to iden	tify your case:			Cha	als if this	io	
	Debtor 1	Karen	Pamelia	Shrie	•	l	ck if this An ame	ended filing	
	Debior 1	First Name	Middle Name	Last Na		片		lement showing	postpetition
	Debtor 2					_		13 expenses a	
	(Spouse, if filing)	First Name	Middle Name	Last Na	me		followin	ig date:	
	United States Bank	ruptcy Court for th	ne: WESTERN DIS	TRICT OF	TEXAS		MM / D	D / YYYY	<u> </u>
	Case number	16-10420							
	(if known)	201]			
	fficial Form 10								
	chedule J: Yo	•							12/15
			ible. If two married po needed, attach anotho						
		-	nswer every question		•		•		•
E	Part 1: Descr	ibe Your Hou	sehold						
1.	Is this a joint cas	se?							
	_								
	✓ No. Go to lir		separate household?	•					
	□ No		copulato nouconola.						
	☐ Ye	s. Debtor 2 must	file Official Form 106J	-2, Expenses	s for Separate Housel	hold o	f Debtor	2.	
2.	Do you have dep	endents?	1 No					5	
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this in for each dependent		Dependent's relati Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you?
	Do not state the d	enendents'							Yes
	names.	ependents							No No
									- ☐ Yes ☐ No
									Yes
									□ No
					-				Yes
									□ No - □ Yes
3.	Do your expense	es include	√ No						
٥.	expenses of peo		Yes						
	yourself and you	r dependents?							
F.	Part 2: Estima	ata Vaur Ona	oing Monthly Exp	oneoe					
					vo vojna thio form o			t in a Chantar	12
		-	nkruptcy filing date u he bankruptcy is filed	-	-			-	
	form and fill in the								•
			sh government assis on Schedule I: Your I					Your expens	ses
4.		•	penses for your resid					4	\$2,000.00
	Include first mortg		d any rent for the grou	nd or lot.			(See	continuation sh	eet(s) for details)
								10	
	4a. Real estate t							4a. 	
	4b. Property, hor	meowner's, or ren	ter's insurance				4	4b	
	4c. Home mainte	enance, repair, an	d upkeep expenses				4	4c	
	4d. Homeowner's	s association or c	ondominium dues				4	4d.	

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Debtor 1 Karen **Pamelia** Shrier Case number (if known) 16-10420 Last Name Middle Name First Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$150.00 6b. Water, sewer, garbage collection 6b. \$150.00 6c. Telephone, cell phone, Internet, satellite, and 6c. cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$400.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train 12. \$300.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$100.00 magazines, and books 14. Charitable contributions and religious donations 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance \$138.00 15c. 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: Expenses on house in California 17c. \$100.00 17d. Other. Specify: Payment on brother's mobile home 17d. \$523.00 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

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20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Under Specify: 21. ** 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22c. Add line 22a and 22b. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your a monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your a monthly income. 23c. Subtract your monthly expenses from your and within the year after you file this form? 24. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? 25. Explain here: 26. None. 27. None. 28. The rental or home ownership expense for your residence (details): 29. None. 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 20. Suppose the first paying for your residence (details): 21. Suppose the first paying for your residence (details): 22. Suppose the first paying for your resid	Deb	tor 1	Karen	Pamelia Middle Norse	Shrier	Case number (if know	n) <u>16-10420</u>
Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. 4. Journal of the Specify: 21. Section of the Specify: 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22c. Add line 22a and 22b. The result is your monthly expenses. 23c. Add line 22a and 22b. The result is your monthly expenses. 23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly perform your monthly income. The result is your monthly net income. 23c. \$11,118.00 24. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. Yes. Explain here: None. 1. The rental or home ownership expense for your residence (details): Rent in Salado \$2,000.00			First Name	Middle Name	Last Name		
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20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. 20e. 20e. 20e. 20e. 20e. 20e. 20e.		20a.	Mortgage	es on other property		20a.	
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other. Specify:		20b.	Real esta	ate taxes		20b.	
20e. Homeowner's association or condominium dues 21. Other. Specify:		20c.	Property,	homeowner's, or renter's insura	ance	20c.	
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For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.		23c.		your monthly expenses from yo It is your monthly net income.	ur monthly income.	23c.	\$11,118.00
payment to increase or decrease because of a modification to the terms of your mortgage? No. Yes. Explain here: None. The rental or home ownership expense for your residence (details): Rent in Salado \$2,000.00	24.	Do y	ou expect	an increase or decrease in yo	our expenses within the year	after you file this form?	
Yes. Explain here: None. 1. The rental or home ownership expense for your residence (details): Rent in Salado \$2,000.00							
Rent in Salado \$2,000.00			Yes. Expl				
Rent in Salado \$2,000.00	4.	The	rental or h	ome ownership expense for y	our residence (details):		
Total: \$2,000.00				•	· · · · · ·	_	\$2,000.00
						Total:	\$2,000.00

	Karen	Pamelia Middle Norse	Shrier	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)		Middle Name or the: WESTERN DI	Last Name	
	16-10420			Check if this i

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$2,900,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$9,190,207.25
	1c. Copy line 63, Total of all property on Schedule A/B	\$12,090,207.25
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$1,737,952.22
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$18,410.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$15,000.00
	Your total liabilities	\$1,771,362.22
	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$15,204.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$4,086.00

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Del	otor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known)	6-10420
Р	art 4:	Answer Th	nese Questions fo	r Administrative	and Statistical Records	
6.	Are y	ou filing for bank	ruptcy under Chapter	s 7, 11, or 13?		
	_	√lo. You have notl √es	hing to report on this pa	urt of the form. Check	this box and submit this form to the court wi	th your other schedules.
7.	What	kind of debt do y	ou have?			
	_	•	•		are those "incurred by an individual primarily es 8-9g for statistical purposes. 28 U.S.C. §	•
			ot primarily consumer urt with your other sche		thing to report on this part of the form. Check	this box and submit
8.			f Your Current Monthl ne 11; OR, Form 122B	•	total current monthly income from 22C-1 Line 14.	\$11,248.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$16,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$16,000.00

Fill in this info	ormation to ide	entify your case	:		
Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name		
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	_	
United States Bar	nkruptcy Court for t	he: WESTERN DI S	STRICT OF TEXAS		
Case number (if known)	16-10420				Check if this is amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
✓ No						
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
X /s/ Karen Pamelia Shrier Karen Pamelia Shrier, Debtor 1	XSignature of Debtor 2					
Date <u>05/04/2016</u> MM / DD / YYYY	Date MM / DD / YYYY					

Debtor 1	Karen	Pamelia	Shrier		
	First Name	Middle Name	Last Name		
Debtor 2	-				
Spouse, if filing)) First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court fo	or the: WESTERN DIS	STRICT OF TEXAS		
Case number	16-10420			☐ Check if this is an	
(if known)				amended filing	
official Form	า 107				
tatement c	 of Financial	Affaire for Ind	lividuals Filing for Bar	akruptov	04/1
rrect information	on. If more spac		separate sheet to this form. On	h are equally responsible for supplying the top of any additional pages, write	
orrect information	on. If more spac ase number (if kr	e is needed, attach a nown). Answer every	separate sheet to this form. On	the top of any additional pages, write	
orrect information our name and care an	on. If more space ase number (if ki ve Details Abo	e is needed, attach a nown). Answer every out Your Marital S	separate sheet to this form. On question.	the top of any additional pages, write	
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what is your Married Not marri During the la	on. If more space ase number (if knowe Details Above current marital sied ast 3 years, have all of the places	e is needed, attach a nown). Answer every out Your Marital Satatus? you lived anywhere one out you lived in the last 3 you li	separate sheet to this form. On question. Status and Where You Live other than where you live now?	the top of any additional pages, write d Before	
what is your Married Not marri During the la Yes. List Within the la (Community p	on. If more space ase number (if known per current marital side ast 3 years, have all of the places at 8 years, did years	e is needed, attach a nown). Answer every out Your Marital Satatus? you lived anywhere of you lived in the last 3 you ever live with a spo	separate sheet to this form. On question. Status and Where You Live other than where you live now? Years. Do not include where you live ouse or legal equivalent in a com	the top of any additional pages, write	.,
Part 1: Gi What is your Married No marrie During the la No Yes. List Within the la (Community) Washington,	on. If more space ase number (if known per current marital and ast 3 years, have at all of the places ast 8 years, did year or operty states are and Wisconsin.)	e is needed, attach a nown). Answer every out Your Marital Status? you lived anywhere of you lived in the last 3 you ever live with a spond territories include Ar	separate sheet to this form. On question. Status and Where You Live other than where you live now? Years. Do not include where you live ouse or legal equivalent in a com	the top of any additional pages, write d Before /e now. munity property state or territory?	i,

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case nur	mber (if known))
Part 2:		e Sources of Y				
Fill in If you	rou have any incon the total amount on a re filing a joint ca	me from employn f income you rece ase and you have i	nent or from operating a bu ived from all jobs and all bus income that you receive toge	inesses, including par	t-time activities.	endar years?
∀ Y	es. Fill in the deta	IIS.	Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	uary 1 of the curre ou filed for bankr	•	Wages, commissions, bonuses, tips✓ Operating a business	\$26,569.17	☐ Wages, commissions, bonuses, tips☐ Operating a business	
	st calendar year: to December 31,	<u>2015</u>)	Wages, commissions, bonuses, tips✓ Operating a business	\$39,594.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
January 1 5. Did y Includ	de income regardle	2014) YYYYY her income durin	Wages, commissions, bonuses, tips ✓ Operating a business g this year or the two previous income is taxable. Example ayments; pensions; rental income is taxable.	s of other income are	• • • • • • • • • • • • • • • • • • • •	•
and g Debto List e	gambling and lotter or 1.	y winnings. If you e gross income fro	are in a joint case and you h	ave income that you re	eceived together, list it only o	•
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
	uary 1 of the curre ou filed for bankr		Social Security pension	\$8,523.00 \$3,452.88		
	st calendar year: I to December 31,	<u>2015</u>)	Social Security Pension	\$17,046.00 \$10,359.00		
	alendar year befor to December 31,	2014)	Pension	\$10,359.00		
	7	YYYY				

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Del	btor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name		Case number (if know	wn) _	16-10420
P	art 3:	•			ou Filed for Ba	nkruptcv		
6.								
υ.	No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					1 U.S.C. § 101(8) as		
		•	0 days before you filed fo				or mo	ore?
		☐ No. Go t	o line 7.					
		tota	t below each creditor to val al amount you paid that old d support and alimony.	reditor. Do not in	clude payments for	domestic support of	bligati	ions, such as
	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.					f adjustment.		
	✓ Yes	Debtor 1 or	Debtor 2 or both have	primarily consur	ner debts.			
		During the 9	0 days before you filed for	or bankruptcy, dic	l you pay any credite	or a total of \$600 or	more	?
		☐ No. Go t	o line 7.					
		cre	t below each creditor to v ditor. Do not include pay o, do not include payme	yments for domes	tic support obligation	ns, such as child su		
				Dates of payment	Total amount paid	Amount you still owe	Wa	as this payment for
	K Financi			\$1800.00	\$5,400.00	\$180,000.00	_ 🗹	
				per month				Car Credit card
Nur	nber Str	eet						Loan repayment
								Suppliers or vendors Other
City	,		State ZIP Code					
7.	Insiders corpora agent, is such as	s include your re tions of which you ncluding one for child support a	ou are an officer, directo a business you operate nd alimony.	ners; relatives of r, person in contro	any general partner ol, or owner of 20%	s; partnerships of whor more of their votin	hich y ng se	was an insider? rou are a general partner; curities; and any managing domestic support obligations
	√ Yes	s. List all payille	ents to an insider.	5			_	
				Dates of payment	Total amount paid	Amount you still owe	Ke	ason for this payment
	n Shrier der's name			\$1,204.20				ade payments on a mobile
111510	uei s name			in 2016 \$6,806.28				ome to Fidelity Bank of TX r Jim Shrier, brother of
Nur	nber Str	eet		in 2015				ebtor
				_				
City	,		State ZIP Code	_				

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Deb	tor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known) 16-10420			
3.	Within				payments or transfer any property on account of a debt that			
	benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	₩ No	payments on deb	is guaranteed or cost	gried by air insider.				
	ست	s. List all paymen	ts that benefited an in	sider.				
		•						
Pa	art 4:	Identify Leg	al Actions, Repo	ssessions, and F	oreclosures			
9.	List all	-	uding personal injury		any lawsuit, court action, or administrative proceeding? tions, divorces, collection suits, paternity actions, support or custody			
	✓ No ☐ Yes	s. Fill in the detail	s.					
10.	seized,	or levied?	u filed for bankruptc		operty repossessed, foreclosed, garnished, attached,			
		Go to line 11. s. Fill in the inform	nation below.					
11.			•	cy, did any creditor, i ake a payment becau	ncluding a bank or financial institution, set off any se you owed a debt?			
	✓ No ☐ Yes	s. Fill in the detail	S.					
12.		-		y, was any of your pro codian, or another offi	operty in the possession of an assignee for the benefit of cial?			
	✓ No	3						
Pa	art 5:	List Certain	Gifts and Contri	ibutions				
		2 years before yo	ou filed for bankrupt	cy, did you give any g	ifts with a total value of more than \$600 per person?			
	✓ No ☐ Yes	s. Fill in the detail	s for each gift.					
14.		2 years before yo	ou filed for bankrupt	cy, did you give any g	ifts or contributions with a total value of more than \$600			
	✓ No	s. Fill in the detail	s for each gift or cont	ribution.				

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Deb	tor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if kno	own) 16-10420			
Pa	art 6:		in Losses	Lastivamo					
	Within other d		you filed for bankru nbling?	ptcy or since you filed for	bankruptcy, did you lose anyth	ing because of t	heft, fire,		
Pa	art 7:	List Certa	in Payments or	Transfers					
16.	anyone Include	you consulted	d about seeking bai bankruptcy petition բ	nkruptcy or preparing a ba	se acting on your behalf pay or ankruptcy petition? ng agencies for services required				
Perso	uglas J. on Who V W. 10	Powell		Description and value o \$1500.00 (including fi	f any property transferred ling fee)	Date payment or transfer was made 4/7/2016	Amount of payment \$1,500.00		
Emai	well@o	dougpowellia te address	, if Not You	- - ptcv. did you or anyone el	se acting on your behalf pay or	transfer any pro	operty to		
	anyone Do not	e who promised include any pay	d to help you deal v ment or transfer that		ake payments to your creditors		.		
18.	Yes. Fill in the details. 8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
19.	Within you are		e you filed for bank ? (These are ofter	ruptcy, did you transfer a called asset-protection dev	ny property to a self-settled true	st or similar devi	ce of which		

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Debtor 1		Karen Pamelia First Name Middle Name		Shrier Last Name	Case number (if known)	16-10420		
Par	t 8:	List Certain	Financial Accou	nts, Instruments, Sa	fe Deposit Boxes, and Sto	rage Units		
t	enefit	, closed, sold, mo	ved, or transferred?	i -	ounts or instruments held in your		age	
h	nouses		•	ons, and other financial ins	•	o, ordan amono, pronon	ugo	
[s. Fill in the details	3.					
	 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? 							
[[☑ No ☐ Yes	s. Fill in the details	3 .					
[□ No	ou stored properts. Fill in the details	-	r place other than your h	ome within 1 year before you file	d for bankruptcy?		
			Who e	lse has or had access to	it? Describe the content		you still e it?	
		ublic Storage -			household furnishi	_	No	
	or Stora E . 25t ł	ge Facility	Name				Yes	
Numbe		eet	Number	Street				
San I	Mateo		ZIP Code City	State ZIP	Code			
,	rt 9:	•	,	r Control for Someo				
	-	hold or control a		neone else owns? Includ	de any property you borrowed fro	om, are storing for,		
	☑ No ☐ Yes	s. Fill in the details	3 .					

Deb	otor 1	Karen	Pamelia			Case number (if known)	16-104	20			
ь	art 10:	First Name Give Deta	Middle Nar	ne Last Name vironmental Informati	on						
				definitions apply:							
= ,	<i>Environi</i> hazardoi	mental law mea	ans any federal, stance, wastes,	state, or local statute or r or material into the air, la olling the cleanup of these	nd, soil, surface	water, groundwater, o			of		
		-		operty as defined under ar lize it, including disposal	•	law, whether you not	w own, ope	erate, or			
			, ,	n environmental law defind int, contaminant, or simila		s waste, hazardous s	ubstance,	toxic			
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.										
24.	Has an law?	y governmenta	ıl unit notified y	ou that you may be liable	or potentially liak	ole under or in violatio	on of an en	vironme	ental		
	✓ No ☐ Yes	s. Fill in the det	ails.								
25.	 Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. 										
26.	Have you		y in any judicial	or administrative proceed	ling under any er	nvironmental law? Inc	clude settle	ements a	and		
	✓ No	s. Fill in the det	ails.								
P	art 11:	Give Deta	ils About Yo	ur Business or Conne	ections to Any	Business					
27.	Within busine	-	you filed for ba	nkruptcy, did you own a b	usiness or have	any of the following c	onnection	s to any			
		A member of a A partner in a An officer, dire	a limited liability partnership ector, or managii	yed in a trade, profession, of company (LLC) or limited liaining executive of a corporation voting or equity securities of	ability partnership		ne				
	_		oove applies. Go t apply above an	o to Part 12. Ind fill in the details below for	each business.						
	ctronic iness Nam	Polymers, Inc	с	Describe the nature of the manufactures polymer devices from nano ma	sensing	Employer Identific Do not include So			ber or	ITIN.	
		e tone Terrace		5G data transmission		EIN: 2 6 - 4	0 5	0 0	6 6		
Num	nber Str	eet		Name of accountant or bo	ookkeeper	Dates business ex	xisted				
						From2001	То _	prese	nt		
Jar City	rell	TX State	76537 ZIP Code						·		

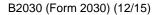
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Debtor	1 Karen	Pamelia	Shrier	Case number (if known) _ 16-10420
	First Name	Middle Name	Last Name	
	•	e you filed for bankrupt ons, creditors, or other	• •	cial statement to anyone about your business? Include
	No Yes. Fill in the de	tails below.		
Part	12: Sign Belo	ow		
that an proper or both	swers are true and ty by fraud in conn n. 18 U.S.C. §§ 152	correct. I understand ection with a bankrupt , 1341, 1519, and 3571.	that making a false state cy case can result in fin	ttachments, and I declare under penalty of perjury ement, concealing property, or obtaining money or es up to \$250,000, or imprisonment for up to 20 years,
	Karen Pamelia SI en Pamelia Shrier, D		X Signature of Deb	otor 2
Date	05/04/2016	_	Date	
Did yo	u attach additional	pages to Your Stateme	ent of Financial Affairs fo	or Individuals Filing for Bankruptcy (Official Form 107)?
☑ No				
Yes				
Did you	u pay or agree to p	ay someone who is no	t an attorney to help you	fill out bankruptcy forms?
☑ No				
	s. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

ln	re Karen Pamelia Shrier	Case No.	16-10420
		Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTORNI	EY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the att that compensation paid to me within one year before the filing of the petition in bank services rendered or to be rendered on behalf of the debtor(s) in contemplation of o is as follows:	ruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$3	3,600.00
	Prior to the filing of this statement I have received	\$1	1,190.00
	Balance Due	\$2	2,410.00
2.	The source of the compensation paid to me was: ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	☑ I have not agreed to share the above-disclosed compensation with any other perassociates of my law firm.	erson unles	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another person associates of my law firm. A copy of the agreement, together with a list of the noncompensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all as	pects of the	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in a bankruptcy;	determining	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and plan w	hich may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing	, and any	adjourned hearings thereof;



6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/04/2016 /s/ Douglas J. Powell

Date Douglas J. Powell Bar No. 16194900

The Law Offices of Douglas J. Powell, P. C.

820 West 10th Street Austin, TX 78701

Phone: (512) 476-2457 / Fax: (512) 477-4503

/s/ Karen Pamelia Shrier

Karen Pamelia Shrier

F	ill in this info	ormation to iden	tify your case:		Check as	directed in lines 17 a	nd 21:
De	ebtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	According to Statement:	the calculations required by	this
	ebtor 2 pouse, if filing)	Firet Name	Middle Name	Last Name	 —	ble income is not determine I U.S.C. § 1325(b)(3).	ed
		nkruptcy Court for the			2. Disposa	ble income is determined I U.S.C. § 1325(b)(3).	
	ase number known)	16-10420			11—	nmitment period is 3 years. nmitment period is 5 years.	
∟ Of	ficial Form	122C-1			Check if the	nis is an amended filing	
Ch an	apter 13 \$ d Calculat as complete ar	Statement of `tion of Comm	itment Perio	I people are filing togeth	er, both are equally		12/15
info	art 1: Cal	es. On the top of any	y additional pages, rage Monthly In				
1.	What is your	marital and filing sta	atus? Check one on	ıly.			
	✓ Not marr	ried. Fill out Column	A, lines 2-11.				
	☐ Married.	Fill out both Column	s A and B, lines 2-1	1.			
	bankruptcy ca August 31. If in the result.	ase. 11 U.S.C. § 10 the amount of your m Do not include any inc	1(10A). For example northly income varied come amount more	e, if you are filing on Septed d during the 6 months, add	ember 15, the 6-mont d the income for all 6 f both spouses own t	nonths before you file this h period would be March 1 months and divide the tota ne same rental property, pu space.	through I by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	rages, salary, tips, b	onuses, overtime,	and commissions	\$10,385.33		
3.	Alimony and	maintenance payme	nts. Do not include	e payments from a spouse	\$0.00		
4.	expenses of y regular contrib your depender		ents, including chile rried partner, membe mmates. Do not incl		\$0.00		
	expenses of y regular contrib your depender spouse. Do no	you or your dependent outions from an unma onts, parents, and roor	ents, including child rried partner, membramates. Do not included you listed on line 3.	d support. Include ers of your household, ude payments from a	\$0.00		
	expenses of y regular contrib your depender spouse. Do no	you or your dependentions from an unmants, parents, and roor ot include payments y	ents, including child rried partner, membramates. Do not included you listed on line 3.	d support. Include ers of your household, ude payments from a	\$0.00		
	expenses of y regular contrib your depender spouse. Do no	you or your dependentions from an unmants, parents, and roor ot include payments your operating a busing	ents, including chili- rried partner, membramates. Do not included you listed on line 3.	d support. Include ers of your household, ude payments from a or farm	\$0.00		
4 . 5 .	expenses of y regular contrib your depender spouse. Do no Net income fr Gross receipts deductions)	you or your dependentions from an unmants, parents, and roor ot include payments your operating a busing	ents, including chili- rried partner, membr mmates. Do not incl you listed on line 3. iness, profession, of Debtor 1	d support. Include ers of your household, ude payments from a or farm			

Deb	tor 1	Karen	Pamelia	Shrier		ase number (if k	nown) <u>16-10420</u>	
		First Name	Middle Name	Last Name		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net	income from rental	and other real proper Debtor	•				
		ss receipts (before a actions)		\$0.00				
		nary and necessary enses	· · · · · ·	\$0.00 _	— Сору	*		
		monthly income fron r real property	n rental or	\$0.00	here →	\$0.00		
7.	Inte	est, dividends, and	d royalties			\$0.00		
8.	Une	mployment compe	nsation			\$0.00		
			•	e amount received was a list it here:				
	F	or you			\$0.00			
	F	or your spouse						
9.		sion or retirement in a benefit under the		e any amount received	that	\$863.00		
	or pa	ayments received as	s a victim of a war crim stic terrorism. If neces	under the Social Securi e, a crime against huma sary, list other sources	anity,			
	Tota	I amounts from sepa	arate pages, if any					
11.	Calc Add	ulate your total ave lines 2 through 10 fe	erage monthly incom		[\$11,248.33	+	= \$11,248.33 Total average monthly income
Pa	art 2	Determine	How to Measure	Your Deductions f	rom Income	e		,
12.	Сор	y your total averag	e monthly income fro	om line 11				\$11,248.33
13.	Calc	ulate the marital a	djustment. Check on	e:				
		You are married an Fill in the amount o of you or your depethan you or your de Below, specify the I necessary, list additional and the specific street and the specific street.	d your spouse is filing d your spouse is not fi f the income listed in liendents, such as paymependents.	ne 11, Column B, that we net of the spouse's tax I income and the amount a separate page.	as NOT regula	pouse's support	of someone other	
		Total		total in line 13 from line		\$0.00 Cop	y here →	- \$0.00

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Deb	otor 1		aren st Name	Pamelia Middle Name	Shri	ier Name		Case nun	nber (if known)	16-10420	
15.	Calc			nthly income for the			ese steps:				
	15a.	Cop	y line 14 here	·							\$11,248.33
			_	2 (the number of m							X 12
	15b.		.,	ent monthly incom		,	is part of the	form			\$134,979.96
16.			·	y income that app	•		·				
			n the state in which		nico to y	74. 1 01101	Texas	··			
				eople in your hous	ehold		1				
							<u> </u>				¢44 220 00
	16c.	To fi	ind a list of application	ily income for your able median incom rm. This list may a	e amount	s, go onli	ne using the	link specified i	n the separate		\$44,230.00
17.	How	do th	e lines compare	?							
	17a.			than or equal to line § 1325(b)(3). Go t					•		
	17b.	$\overline{\mathbf{A}}$	11 U.S.C. § 1328	than line 16c. On 5(b)(3). Go to Part t form, copy your c	3 and fill	out Calc	ulation of Yo	our Disposabl			
P	art 3:	C	Calculate You	r Commitment	Period	Under	11 U.S.C.	§ 1325(b)(4)		
18.	Сору	y your	total average m	onthly income fro	m line 11						\$11,248.33
19.	that o	calcula	•	nent if it applies. Dent period under 1 Im line 13.	•			•			
	19a.	If the	e marital adjustme	ent does not apply,	fill in 0 or	n line 19a				-	\$0.00
	19b.	Sub	tract line 19a fro	m line 18.							\$11,248.33
20.	Calc	ulate y	your current moi	nthly income for the	he year.	Follow th	ese steps:				
	20a.	Copy	y line 19b								\$11,248.33
		Mult	iply by 12 (the nu	mber of months in	a year).						X 12
	20b.	The	result is your curr	ent monthly incom	e for the y	ear for th	is part of the	form.			\$134,979.96
	20c.	Copy	y the median fam	ily income for your	state and	size of he	ousehold fror	m line 16c			\$44,230.00
21.	How	do th	e lines compare	?							
	_			ne 20c. Unless other				the top of page	1 of this form,		
	_			or equal to line 20c.			•	•	e top of page 1		

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known) 16-10420
Part 4:	Sign Belov	N		
By sigr	ning here, under	penalty of perjury I decl	are that the informat	ion on this statement and in any attachments is true and correct.
χ /s/	Karen Pamelia	a Shrier		X
Kar	en Pamelia Shri	er, Debtor 1	_	Signature of Debtor 2
Dat	e 5/4/2016 MM / DD / YY	YY		Date MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:							
Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for	the: WESTERN DIS	STRICT OF TEXAS	_			
Case number (if known)	16-10420						

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$585.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$60.00				
7b. Number of people who are under 65	x <u>1</u>	Сору			
7c. Subtotal. Multiply line 7a by line 7b.	\$60.00	here -	\$60.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$144.00				
7e. Number of people who are 65 or older	х	Сору			
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	here -	+\$0.00	Сору	
7g. Total. Add lines 7c and 7f			\$60.00	here -	\$60.00

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Debto	r 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	C	ase number (if known) 16-10420	
Loca	al Sta	ındards	You must use the IRS L		swer the guestion	us in lines 8-15.	
Base for b	ed on ankr	n information ruptcy purpos		stee Program has d		ocal Standard for housing	
■ H To a the I	lousi nswe ink s	ng and utilitie	es Mortgage or rent exp ons in lines 8-9, use the U. e separate instructions fo	enses S. Trustee Program		, 0	
8.	Hou	sing and utilit				f people you entered in line 5,	\$449.00
9.	Hou	sing and utilit	ties Mortgage or rent ex	penses:			
	9a.		nber of people you entered ty for mortgage or rent expe		lar amount listed	<u>\$1,144.00</u>	
	9b.	Total average your home.	monthly payment for all m	ortgages and other de	ebts secured by		
		contractually	he total average monthly padue to each secured creditors. Next divide by 60.				
		Name of the	e creditor	Average payment	monthly		
		PennyMac	Loan Services, LLC	\$6,05	6.53		
				+	<u> </u>	Repeat this	
		9b. Total ave	erage monthly payment	\$6,05	Copy 6.53 here	- \$6,056.53 amount on line 33a.	
	9c.	Net mortgage	or rent expense.			Сору	
			9b (total average monthly p). If this number is less that		(mortgage or	\$0.00 here	\$0.00
10.	-		he U.S. Trustee Program's			_	
	Expl why:						- -
11.		al transportat 0. Go to line 1. Go to line	14.	number of vehicles fo	r which you claim	an ownership or operating expense	
	— Vehi	-	expense: Using the IRS L			nicles for which you claim the metropolitan statistical area.	\$244.00

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Debto	r 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known	n) 16-10420			
13.	Vehi expe	ase ayments on							
	Vehi	icle 1 Des	cribe Vehicle 1:						
	13a.	Ownership or I	00						
	13b.								
		Do not include							
		To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.							
		Name of each creditor for Vehicle 1		Average mo payment	Average monthly payment				
				+	_ _	Repeat this			
			Total average monthly pay	ment \$0.0	Copy here → - \$0.0	amount on line 33b. Copy net Vehicle 1 expense			
	13c.		ownership or lease expense. 3b from line 13a. If this numb	per is less than \$0, er	nter \$0. \$517. 0		\$517.00		
	Vehi	icle 2 Des	cribe Vehicle 2:						
	13d.	Ownership or I	easing costs using IRS Local						
	13e.	Average month costs for lease	nly payment for all debts secu d vehicles.	red by Vehicle 2. Do	not include				
		Name of eac	h creditor for Vehicle 2	Average mo payment	nthly				
					_ _	Repeat this			
			Total average monthly pays	ment	Copy here -	amount on Iine 33c. Copy net			
	13f.		ownership or lease expense. 3e from 13d. If this number is	s less than \$0, enter	\$0.	Vehicle 2 expense here	\$0.00		
14.			on expense: If you claimed ense allowance regardless of		using the IRS Local Standards, fill ic transportation.	in the Public	\$0.00		

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Debto	r 1 Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known) 16-10420				
15.	15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.							
Othe	er Necessary Expens		he expense deductions listed	above, you are allowed your monthly expenses to	for the			
16.	employment taxes, so your pay for these tax and subtract that num	othly amount that you a ocial security taxes, and es. However, if you ex	ctually pay for federal, state a I Medicare taxes. You may in pect to receive a tax refund, y hly amount that is withheld to	nd local taxes, such as income taxes, self- clude the monthly amount withheld from rou must divide the expected refund by 12 pay for taxes.	\$0.00			
17.	union dues, and unifo	rm costs.		bb requires, such as retirement contributions, y 401(k) contributions or payroll savings.	\$0.00			
18.	3. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.							
19.	agency, such as spou	sal or child support pag	yments.	ort. You will list these obligations in line 35.	\$0.00			
20.	■ as a condition for	your job, or	ou pay for education that is eit	ther required: education is available for similar services.	\$0.00			
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.							
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.							
23.	3. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.							
24.	Add all of the expense Add lines 6 through 2		RS expense allowances.		\$1,995.00			
Add	itional Expense Dedu		e additional deductions allowe not include any expense allow					
25.		nsurance, and health sa	<u>-</u>	penses. The monthly expenses for health onably necessary for yourself, your				
	Health insurance		\$0.00					
	Disability insurance		\$0.00					
	Health savings account + \$0.00							
	Total		\$0.00 Copy	total here	\$0.00			
	Do you actually spend this total amount?							
	, , ,	do you actually spend?						
26.	Continued contributi will continue to pay fo member of your house	r the reasonable and nehold or member of you	ecessary care and support of	The actual monthly expenses that you an elderly, chronically ill, or disabled able to pay for such expenses. These gram. 26 U.S.C. § 529A(b).	\$0.00			

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Debtor 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case number (if known) 16-10420				
saf	otection against fa fety of you and you	amily violence. The re	asonably necessary mor	on the state of th		\$0.00		
	Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.							
•	•	n have home energy cos excess amount of home		e home energy costs included in expenses on				
	0 ,	ase trustee documentat asonable and necessary	•	ses, and you must show that the additional				
\$16	Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.							
	You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.							
* S	Subject to adjustme	nt on 4/01/19, and ever	y 3 years after that for ca	ses begun on or after the date of adjustment.				
hig	her than the combi	ned food and clothing a	,	ch your actual food and clothing expenses are tional Standards. That amount cannot be more dards.				
		•	nal allowance, go online be available at the ban	using the link specified in the separate cruptcy clerk's office.				
Yo	u must show that th	ne additional amount cla	aimed is reasonable and	necessary.				
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial astruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).		+	\$0.00				
Do	not include any am	nount more than 15% of	f your gross monthly inco	me.				
	ld all of the addition delines 25 though 3	onal expense deductio	ns.			\$0.00		

Debtor 1		Karen	Pamelia Shrier		Case number (if known) 16-10420				
		First Name	Middle Name	Last Name					
Ded	luction	ns for Debt Paymen	t						
33.		lebts that are secure				iding hom	e mortgages, vehi	cle	
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured the 60 months after you file for bankruptcy. Then divide by 60.							d creditor in	
	·						Average monthly payment		
		Mortgages on you	r home				•		
	33a.	Copy line 9b here				·····	\$6,056.53		
		Loans on your firs	t two vehicles						
	33b.								
	33c.	Copy line 13e here					\$0.00		
	33d.	. List other secured debts: ne of each creditor for er secured debt					_		
				Identify property to secures the debt	incl	s payment ude taxes rance?			
	D.K.	Financial		Homestead in C	Α	☑ No	\$1,800.00		
			_			☐ Yes			
						□ No			
						Yes			
						☐ No ☐ Yes	+		
						Ц	4	Copy total	
	33e.	Total average mon	thly payment. A	dd lines 33a throug	h 33d		\$7,856.53	here →	\$7,856.53
34.		iny debts that you li ssary for your supp				ce, a vehic	cle, or other prope	rty	
	ш.	•	•	ust pay to a creditor, called the cure amou				•	
Nan	ne of t	he creditor	Identify prop secures the		Total cure amount		Monthly cure amount		
Per	nyMa	ac Loan Services,	1 2399 Puris	ima Creek Road,	\$200,000.00	÷ 60 =	\$3,333.33		
						÷ 60 =			
			_			÷ 60 =	+	Comutatal	
						Total	\$3,333.33	Copy total here	\$3,333.33
35. Do you owe any priority claimssuch as a priority tax, child support, or alimonythat are past due as of the filing date of your bankruptcy case?11 U.S.C. § 507.									
	□ ¹	No. Go to line 36.							
	☑ `	Yes. Fill in the total current or ong		f these priority claim ms, such as those y					
		Total amount	of all past-due p	oriority claims			\$18,410.00	÷ 60 =	\$306.84

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Debto	or 1	Karen First Name	Pamelia Middle Name	Shrier Last Name	Case	e number (if known)	16-10420	_		
36.	Proje	Projected monthly Chapter 13 plan payment								
	Office	e of the United St	our district as stated or ates Courts (for district e for United States Tru	ts in Alabama and No	rth Carolina) or					
	To find a list of district multipliers that includes your district, specified in the separate instructions for this form. This list at the bankruptcy clerk's office.							_%		
	Avera	age monthly admi	nistrative expense			\$1,110.00	Copy total here	\$1,110.00		
37.		all of the deducti ines 33g through	ions for debt paymen 36.	t.				\$12,606.70		
Tota	al Ded	uctions from Inc	ome							
38.	Add	all of the allowed	d deductions.							
	Сору	line 24, All of the	e expenses allowed un	nder IRS expense allo	wances	\$1,995.00				
	Сору	line 32, All of the	e additional expense d	eductions		\$0.00				
	Сору	line 37, All of the	e deductions for debt p	ayment		+ \$12,606.70				
	Total	deductions				\$14,601.70	Copy total here	\$14,601.70		
	rt 2:		Your Disposable			b)(2)				
39.			ent monthly income fror errent Monthly Income			d		\$11,248.33		
40.	The ridisab	monthly average of oility payments for eceived in accord	r necessary income y of any child support pa a dependent child, rep lance with applicable n to be expended for sur	yments, foster care pa ported in Part 1 of For onbankruptcy law to t	ayments, or m 122C-1, that	ildren.				
41.	your o	employer withhelds, as specified in 1	irement deductions. If from wages as contril In U.S.C. § 541(b)(7) p as specified in 11 U.S	butions for qualified repay	etirement	\$0.00				
42.			s allowed under 11 U		······	\$14,601.70				
43.	exper circur	nses and you hav mstances and the	l circumstances. If see no reasonable alterrier expenses. You musticial circumstances and	native, describe the sp st give your case truste	ecial ee a detailed					
	Des	scribe the specia	l circumstances	Amount	of expense					
	_									
				+						
				Total	\$0.00 Copy	+\$0.00				

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Debtor			Pamelia	Shrier	Case numb	er (if known)	<u>16-10420</u>	
	·	nents. /	· ·	Last Name 3 e under § 1325(b)(2).	Subtract line 44 from line	14,601.70 39.	Copy here	\$14,601.70 (\$3,353.37)
Part	3: Cha	nge in	Income or Expens	ses				
	virtually certai	n to char elow. Fo	nge after the date you for example, if the wages	iled your bankruptcy pe reported increased afte	he expenses you reported tition and during the time er you filed your petition, o when the increase occurre	your case wil check 122C-1	l be open, i in the first	fill in the column, enter
	Form	Line	Reason for change		Date of change		rease or crease?	Amount of change
Part	122C-1 122C-2 122C-1 122C-2 122C-1 122C-2 122C-1 122C-2					 	Increase Decrease Increase Decrease Increase Decrease Decrease	
	X /s/ Karen Karen Pan Date 5/4	Pameli nelia Shr	ia Shrier ier, Debtor 1	declare that the informa	X Signature of Debto	or 2	chments is	true and correct.